

Lafayette Mayor's Youth Council
Criteria and Application
Deadline for Applying: May 30, 2003

Application for membership in Lafayette Mayor's Youth Council is open to Lafayette youth who complete this application, reside in the City of Lafayette, and are between the ages of 13 and 18.

A panel of adults appointed by the Mayor will choose members of the council. The 16 young adults will represent neighborhoods city-wide and Lafayette's diverse populations. Selection will not be made on the basis of academic, leadership or organizational skills and achievements, but rather on the youth's:

- Interest in participating on the council;
- Willingness to be part of a team that discusses city and neighborhood issues affecting youth; and
- Commitment to attend a monthly meeting for one year.

To apply:

1. Complete this application (please print) and sign.
2. Obtain your parent's or legal guardian's signature on reverse side, giving permission to participate.
3. Mail or deliver the application so its received by May 30, 2003, to:

Office of Mayor Dave Heath
Mayor's Youth Council Application
20 North Sixth St., City Hall
Lafayette, Indiana 47901

Name:_____ Age:_____

School:_____ Grade:_____

Address:_____ Lafayette, Indiana, Zip:_____

Telephone:_____ E-mail:_____

These questions are asked only to assure the council fully represents Lafayette's diversity:

Race or ethnic background:_____ Gender: Male_____Female_____

Please check which applies to you:

_____ I have my own transportation to get to the council meetings.

_____ I will need transportation to get to the council meetings.

Why would you like to serve on the Mayor's Youth Council?

What do you believe are the most important issues in your neighborhood?

What other issues, concerns or needs would you like to address in Lafayette?

What personal skills and characteristics do you possess that would make you a good representative?

What other activities are you involved in during the school year (include employment, sports, community, school and church groups)?

Please list two adult references, people who have known you and worked with you in school or non-school activities.

Name	Address	Telephone
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Name	Address	Telephone
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Student Signature

I understand the monthly time commitment required for the Mayor's Youth Council. I also know the importance of teamwork and cooperation and will make such a commitment to this council.

Signature	Date
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Parent/Legal Guardian's Permission

I give my permission for _____ to seek the position of representative on Lafayette Mayor's Youth Council.

Parent/guardian signature	Date
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Telephone number(s) in case of emergency: _____

Name of emergency contact(s) and relationship to youth: _____